

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69007	1/12/00
O.I.P.E. CLASSIFIER		8	02-2-00
FORMALITY REVIEW	AF	70556	2-7-00
RESPONSE FORMALITY REVIEW			

PF 10556 3-14-00  
INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1/11/00
2	1/11/00
3	1/11/00
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Claim	Date
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Claim	Date
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
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